

Contact Number:

PROVINCE OF KWAZULU-NATAL		
Opening Date:	22/08/2018	
Closing Date:	29/08/2018	HE.
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	EG & Usher Memorial hospital	$\vee$
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	E.G & USHER MEMORIAL HOSPITAL SUPPLY CHAIN	
Date Submitted	: 21/08/2018	ţ
ITEM CATEGORY AND DETAILS		
Quotation Number:	ZNQ:	
	253/18/19	
Item Category: Item Description:	Goods	<u> </u>
Quantity (if supplies)	. •	
COMPULSORY BRIEFING SESSION	/ SITE VISIT	
Select Type:	Not Applicable	Y
Date:	i	10
Time:	:	
Venue:	!!	
	: 	,
QUOTES CAN BE COLLECTED FROM:	E.G & USHER MEMORIAL HOSPITAL	:
QUOTES SHOULD BE DELIVERED TO:	E.G & USHER MEMORIAL HOSPITAL ON A TENDER BOX	
ENQUIRIES REGARDING THE ADVE	RT MAY BE DIRECTED TO:	
Name:	MS B XHAYA	
Email:	Bongeka Xhaya@kznhealth.gov.za	